

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Eighth Congressional Democratic Committee

ADDRESS (number and street) ▼

3757 Madison Lane

☐ Check if different than previously reported. (ACC)

Falls Church

VA

22041

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00210344

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☒ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☒ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Rose Chu

Signature of Treasurer

Rose Chu

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Eighth Congressional Democratic Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
10 / 01 / 2011 To: M M / D D / Y Y Y Y Y Y  
12 / 31 / 2011

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2011</span>		9087.26
(b) Cash on Hand at Beginning of Reporting Period.....	8740.50	
(c) Total Receipts (from Line 19) .....	15425.00	20805.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	24165.50	29892.26
7. Total Disbursements (from Line 31) .....	14243.56	19970.32
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	9921.94	9921.94
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Eighth Congressional Democratic Committee

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
10		01		2011

To:

M M	/	D D	/	Y Y Y Y Y
12		31		2011

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

4550.00

7380.00

(ii) Unitemized .....

5520.00

8070.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

10070.00

15450.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

2500.00

2500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

12570.00

17950.00

## 12. Transfers From Affiliated/Other

Party Committees.....

2855.00

2855.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ..... ▶

15425.00

20805.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

15425.00

20805.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	5712.00	8637.00
(ii) Non-Federal Share.....	1784.58	3359.58
(b) Other Federal Operating Expenditures .....	146.98	473.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	7643.56	12470.32
22. Transfers to Affiliated/Other Party Committees.....	6600.00	7150.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	350.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	14243.56	19970.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12458.98	16610.74

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	12570.00	17950.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12570.00	17950.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	5858.98	9110.74
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	5858.98	9110.74

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Eighth Congressional Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Akram Alzend**

Mailing Address 2816 Pohick Road

City State Zip Code  
 Springfield VA 22153

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Revival Homecare Agency

Occupation

home health

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 13 2011

Transaction ID : SA11AI.5254

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Amir Elsayed**

Mailing Address 8453 Catia Lane

City State Zip Code  
 Springfield VA 22153

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Revival Homecare Agency

Occupation

home health

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 13 2011

Transaction ID : SA11AI.5256

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Edna Frady**

Mailing Address 3440 S Jefferson St Unit 973

City State Zip Code  
 Falls Church VA 22041

FEC ID number of contributing  
federal political committee.

C

Name of Employer

none

Occupation

retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 06 2011

Transaction ID : SA11AI.5246

Amount of Each Receipt this Period

400.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1900.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 15  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Eighth Congressional Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Brian Hannigan**

Mailing Address 1051 N. Liberty Street

City State Zip Code  
Arlington VA 22205

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Smith Dawson and Andrews

Occupation

lobbyist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 13 / 2011

Transaction ID : SA11AI.5250

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. Frank Leone**

Mailing Address 3072 N. Oakland St.

City State Zip Code  
Arlington VA 22207

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Spriggs and Hallingsworth

Occupation

attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 10 / 2011

Transaction ID : SA11AI.5236

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Paul Newbould**

Mailing Address 506 Robinson Court

City State Zip Code  
Arlington VA 22302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Psychological Associa

Occupation

Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 03 / 2011

Transaction ID : SA11AI.5235

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Eighth Congressional Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. C.E. Palmer-Johnson**

Mailing Address 2151 Jamieson Avenue #901

City State Zip Code  
 Alexandria VA 22314

FEC ID number of contributing federal political committee.

C

Name of Employer

NSTI

Occupation

epidemiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 13 2011

Transaction ID : SA11AI.5249

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. James P. Smith**

Mailing Address 3339 Stephenson Place NW

City State Zip Code  
 Washington DC 20015

FEC ID number of contributing federal political committee.

C

Name of Employer

Smith Dawson &amp; Andrews

Occupation

lobbyist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 13 2011

Transaction ID : SA11AI.5252

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Scott Surovell**

Mailing Address 7739 Tauxemont Road

City State Zip Code  
 Alexandria VA 22308

FEC ID number of contributing federal political committee.

C

Name of Employer

Surovell, Markle, Issacs and L

Occupation

attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 01 2011

Transaction ID : SA11AI.5234

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

1050.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Eighth Congressional Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Margaret Willingham**

Mailing Address 306 Bishops Court

City

Falls Church

State

VA

Zip Code

22046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UN Foundation

Occupation

fundraiser

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 09 / 2011

**Transaction ID : SA11AI.5248**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. Agnes Wolf**

Mailing Address 1057 Rocky Run Road

City

McLean

State

VA

Zip Code

22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

none

Occupation

retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 01 / 2011

**Transaction ID : SA11AI.5260**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

600.00

4550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 15

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Eighth Congressional Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Moran for Congress**

Mailing Address 311 N. Washington Street Ste 200-L

City State Zip Code  
 Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

**C** C00241349

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 13 2011

**Transaction ID : SA11C.5274**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

## **B. Owens-Illinois, Inc. Employees Good Citizenship Fund**

Mailing Address One Michael Owens Way

City State Zip Code  
 Perrysburg OH 43551

FEC ID number of contributing  
federal political committee.

**C** C00034330

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 13 2011

**Transaction ID : SA11C.5259**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

2500.00

**TOTAL** This Period (last page this line number only)..... ►

2500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 15

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Eighth Congressional Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Eighth Congressional Democratic Committee Non-Federal**

Mailing Address 3757 Madison Lane

City State Zip Code  
 Falls Church VA 22041

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1071.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2011

**Transaction ID : SA12.5266**

Amount of Each Receipt this Period

1071.00

allocated expenses for fundraising

Full Name (Last, First, Middle Initial)

## **B. Eighth Congressional Democratic Committee Non-Federal**

Mailing Address 3757 Madison Lane

City State Zip Code  
 Falls Church VA 22041

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 07 / 2011

**Transaction ID : SA12.5278**

Amount of Each Receipt this Period

330.00

reimbursement for fundraising expenses

Full Name (Last, First, Middle Initial)

## **C. Eighth Congressional Democratic Committee Non-Federal**

Mailing Address 3757 Madison Lane

City State Zip Code  
 Falls Church VA 22041

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2855.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 10 / 2011

**Transaction ID : SA12.5279**

Amount of Each Receipt this Period

1454.00

reimbursement for fundraising expenses

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2855.00

2855.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 15

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Eighth Congressional Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Eighth Congressional Democratic Committee Non-Federal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2011

Mailing Address 3757 Madison Lane

City	State	Zip Code
Falls Church	VA	22041

**Transaction ID : SB22.5264**Purpose of Disbursement  
contribution

Amount of Each Disbursement this Period

Candidate Name

  
Category/  
Type

4000.00
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. Eighth Congressional Democratic Committee Non-Federal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2011

Mailing Address 3757 Madison Lane

City	State	Zip Code
Falls Church	VA	22041

**Transaction ID : SB22.5265**

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

  
Category/  
Type

2600.00
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Mailing Address

City	State	Zip Code
------	-------	----------

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

  
Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6600.00
---------

6600.00
---------

**SCHEDULE H2 (FEC Form 3X)****ALLOCATION RATIOS**

PAGE 14 OF 15

NAME OF COMMITTEE (In Full)

Eighth Congressional Democratic Committee

**RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. **For PACs Only:** Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER Kennedy King Dinner (10/17/2007) ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input checked="" type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported <b>Transaction ID : H2.5272</b>	FEDERAL % <div>76.20 %</div>	NONFEDERAL % <div>23.80 %</div>
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div></div>	NONFEDERAL % <div></div>
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div></div>	NONFEDERAL % <div></div>
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div></div>	NONFEDERAL % <div></div>
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div></div>	NONFEDERAL % <div></div>
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div></div>	NONFEDERAL % <div></div>

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 15 OF 15

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**Eighth Congressional Democratic Committee**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Steven Bunn</b>		<b>Transaction ID : H4.5269</b>		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 6501 Nevitt Way				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Alexandria	State VA	Zip Code 22315		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: printing				Allocated Activity or Event Year-To-Date 4702.08	
Activity or Event Identifier: Kennedy King Dinner(10/17/2007)		Category/ Type		Date 10 / 17 / 2011	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
154.00			48.08		202.08

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Daniel Steen</b>		<b>Transaction ID : H4.5271</b>		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 6100 N. 30th Street				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Arlington	State VA	Zip Code 22207		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: reimbursement for Hilton hotel				Allocated Activity or Event Year-To-Date 11996.58	
Activity or Event Identifier: Kennedy King Dinner(10/17/2007)		Category/ Type		Date 10 / 26 / 2011	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5558.00			1736.50		7294.50

<b>C. Full Name (Last, First, Middle Initial)</b>				Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement:				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:		Category/ Type		Date	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5712.00		1784.58		7496.58

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
5712.00		1784.58		7496.58